



IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant(s): Eamonn Gormley

Attorney Docket

No.: 1999-0794

Application No.: 09/618,653

Filing Date: July 18, 2000

Examiner Name:

Group Art Unit: 2664

Title: Collision-Free Multiple Access Reservation Scheme For Multi-Tone Modulation Links

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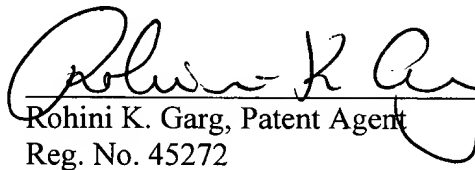
**ASSISTANT COMMISSIONER FOR PATENTS
PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231**

SIR:

ATTENTION: Official Draftsperson

Attached are eight (8) sheets of formal Bristol board drawings in the above-identified application for your approval.

Respectfully,


Rohini K. Garg, Patent Agent
Reg. No. 45272

Date: 11/6/00
AT&T Corp.
P. O. Box 4110
Middletown, New Jersey 07748

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/618653	
	Filing Date	07/18/2000	
	First Named Inventor	Eamonn Gormley	
	Group Art Unit	2664	
	Examiner Name		
Total Number of Pages in this Submission	10	Attorney Docket Number	1999-0794

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Enclosures (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Petition for Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input checked="" type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional enclosure(s) (please identify below)
Remarks		

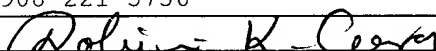
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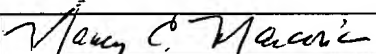
CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or <input checked="" type="checkbox"/> Correspondence address below			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Rohini K. Garg	Reg. #	45272
TELEPHONE	908-221-5756		
SIGNATURE		DATE	11/06/2000

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 11/06/2000			
Type or Printed Name	Nancy C. Marcovici		
Signature		Date	11/06/2000

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